


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 26, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P03000158177	
1. Entity Name ANGELA COOPER'S FLOORING, INC.	

Principal Place of Business 1423 26 STREET NW WINTER HAVEN, FL 33881 US	Mailing Address 1423 26 STREET NW WINTER HAVEN, FL 33881 US
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**DO NOT WRITE IN THIS SPACE**



01042006 No Chg-P CR2E034 (11/05)

4. FEI Number 33-1079811	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

COOPER, ANGELA D  
1423 26 STREET NW  
WINTER HAVEN, FL 33881

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	1100000537513 05/09/06-80021-001 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COOPER, ANGELA D 1423 26 STREET NW WINTER HAVEN, FL 33881
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COOPER, CHARLES G 1423 26 STREET NW WINTER HAVEN, FL 33881
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Angela Cooper Angela Cooper 4/20/06 883-412-7942

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #